## PART B - FEE(S) TRANSMITTAL

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SCIENTIFIC-ATLANTA, INC. INTELLECTUAL PROPERTY DEPARTMENT 5030 SUGARLOAF PARKWAY LAWRENCEVILLE, GA 30044

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(Denositor's name)

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| (A) NAME OF ASSIGNEE  Cisco Technology, Inc.  San Jose, California  Please check the appropriate assignee category or categories (will not be printed on the patent): ladividual lacocordina or other private group entity of Gover.  4a. The following fee(s) are submitted:  | 3. ASSIGNEE NAME A                         | ND RESIDENCE DATA                                  | A TO BE PRINTED ON                                     | THE PATENT (print or t                                 | ype)  |  |  |  |
| Cisco Technology, Inc.  San Jose, California  Please check the appropriate assignee category or categories (will not be printed on the patent): Individual     | PLEASE NOTE: Un<br>recordation as set fort | less an assignee is ident<br>h in 37 CFR 3.11. Com | ified below, no assignee<br>pletion of this form is NC | data will appear on the<br>T a substitute for filing a | patent. If an assign<br>n assignment.       | nee is identified below, the d                           | locument has been filed f                                |  |
| Please check the appropriate assignee category or categories (will not be printed on the patent): Individual I     | (A) NAME OF ASSI                           | GNEE   |  | (B) RESIDENCE: (CIT                                    | Y and STATE OR O                            | COUNTRY)   |  |  |
| 4a. The following fee(s) are submitted:  3 Issue Fee  3 Issue Fee  4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  4c Abek: is enclosed.  4b. Payment by credit card. Form PTO-2038 is attached.  5 The Director is breely authorized to charge the required fee(s), any deficiency, or credit as oversyments, 10 Deposyments, 10 Deposit Account Number 19-9051.   | Cisco Techn                                | ology, Inc.  |  | San Jose,  | California                                  |  |  |  |
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| 5. Change in Entity Status (from status indicated above)   | Advance Order -                            | # of Copies  |  | The Director is here overpayment, to Dep               | by authorized to char<br>sosit Account Numb | rge the required fee(s), any de<br>er 19-0761 (enclose a | eficiency, or credit any<br>an extra copy of this form). |  |
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| a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).   |  |  |  |  |   |  |  |  |
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Authorized Signature Typed or printed name

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